

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		21	11/1/90
FORMALITY REVIEW		7421	12-1-90
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓
2	0
3	✓
4	✓
5	0
6	0
7	✓
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10	✓
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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